| | • | application of Docket Humble |
|--|---|------------------------------|
| | | |
| PATENT APPLICATION FEE DETERMINATION RECORD | | |
| PAILINI AFFLICATION FLE DETERMINATION NECOND | | • |

Effective October 1, 2000

09848546

| CLAIMS AS FILED - PART I | | | | | | SMALL ENTITY | | | OTHER THAN | | | |
|---|---|---|-------------|-------------------------------|---------------------|------------------|--------|------------|------------------------|------------|---------------------|------------------------|
| TOTAL CLAIMS | | (Column 1) | | (Column 2) | | TYPE | | OR | SMALL ENTITY | | | |
| TOTAL CLATIVIS | | | | | | RAT | Έ | FEE | | RATE | FEE | |
| FO | R . | | NUMBER F | ILED | NUMBE | R EXTRA | BASIC | FEE | 355.00 | OR | BASIC FEE | 710.00 |
| TOTAL CHARGEABLE CLAIMS | | 7 / minus 20= * | | 54 | X\$ | 9= | | OR | X\$18= | 979 | | |
| INDEPENDENT CLAIMS | | ₩ minus 3 = | | / | X40 |)== | | OR | X80= | 80 | | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | +13 | 5= | e . | OR | +270= | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | olumn 2 | TOT | AL | | OR | TOTAL | 1762 | | |
| CLAIMS AS AMENDED - PART II | | | | | | | | | | OTHER | | |
| | | (Column 1) | | (Colur | | (Column 3) | SMA | LLI | ENTITY | OR | SMALL | ENTITY |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BÉR OUSLY | PRESENT EXTRA | RAT | Ē | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • | Minus | ** | | = | X\$ 9 |)=- | | OR | X\$18= | |
| AME | Independent | NTATION OF M | Minus | | F OL AINA | = | X40 | . | | OR | X80= | |
| Ļ | FIRST PRESE | NTATION OF MI | JLTIPLE DEP | ENDEN | CLAIM | | +13 | 5 = | ' | OR | +270= | |
| • | | | | | • | | | TAL | - | O D | TOTAL ADDIT. FEE | |
| | | (Column 1) | منسن برا | (Colur | mn 2) | (Column 3) | ADDIT. | ree (| ·. · | | AUUII. FEE | |
| | | CLAIMS | | HIGH | EST | | | | ADDI- | | | ADDI- |
| AMENDMENT.B | | REMAINING AFTER AMENDMENT | | PREVIO | BER DUSLY FOR | PRESENT EXTRA | RAT | Ε | TIONAL FEE | | RATE | TIONAL |
| | Total | • | Minus | ** | | = | X\$.9 |)= | | OR: | X\$18≐ | |
| | .Independent | • | Minus | ***: | | = | X40 | = | | OR | X80= | |
| L | FIRST PRESE | NTATION OF MI | DETIPLE DEP | ENDEN | CLAIM | | +135 | ;= | | OR | +270= | |
| | • | | · | | | | TO | TAL | | OB. | TOTAL | |
| | | io | | 40 | | (O 1 0) | ADDIT. | FEE I | | 0 | ADDIT. FEE | |
| | | (Column 1) CLAIMS | | (Colur | | (Column 3) | | | | . | | |
| NT C | | REMAINING AFTER AMENDMENT | | | IBER OUSLY | PRESENT EXTRA | RAT | E | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| AMENDMENT C | Total | • | Minus | ** | | = | X\$ 9 |)= - | | OR | X\$18= | ; . |
| | Independent | • | Minus | *** | | = | X40 | _ | | OR | X80= | |
| Ľ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | OR | +270= | | | |
| •• | * If the entry in column 1 is less than the entry in column 2, write "o" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | |